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2857

TRANSMITTAL FORM <small>ATTEN & TRADEMARK OFFICE</small> <small>DEC 29 2003</small>		Application Number	09/802,482
		Filing Date	March 9, 2001
		First Named Inventor	Wegerich
		Art Unit	2857
		Examiner Name	Paul L. KIM
		Total Number of Pages in This Submission	1

ENCLOSURES (check all that apply)
PETITION FOR EXTENSION OF TIME

Amendment/Reply
 Before Final
 After Final
 Affidavits/Declarations

Information Disclosure Statement
 PTO-1449 Form(s)
 Cited References

Certified Copy of Priority Document
 Response to Missing Parts/Incomplete Application
 Terminal Disclaimer
 Status Letter

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

Applicant(s) claims small entity status under 37 CFR 1.27.

Applicant(s) petitions for a three-month extension of time and pay the fee of \$475.00 (37 CFR 1.17(a)(1)-(5)).

Applicant(s) believes that no petition for an extension of time is necessary (37 CFR 1.36(c)); however, applicant(s) hereby petition for sufficient extension of time to render the present submission timely.

CLAIMS FEES

No additional claim fee is required.

	Claims Remaining After Amendment	Highest Number Previously Paid For	Extra Claims Present	Small Entity		Large Entity	
				Rate	Addit. Claim Fee	Rate	Addit. Claim Fee
Total	21	-	23	=0	x 9= \$	x 18= \$--	\$--
Independent	5	-	4	=1	x 43= \$43.00	x 86= \$43.00	
<input type="checkbox"/> First Presentation of Multiple Claim				+ 145= \$		+ 290= \$--	

ENCLOSED FEES

<input checked="" type="checkbox"/> Additional Claim Fee	\$ 43.00
<input type="checkbox"/> Extension fee for one-month	\$110.00
<input type="checkbox"/> Information Disclosure Statement	\$180.00
<input type="checkbox"/> Surcharge for Missing Parts – Declaration	\$130.00
<input type="checkbox"/> Terminal Disclaimer	\$110.00
	TOTAL FEES \$ 43.00

PAYMENT OF FEES

A check in the amount of \$ is enclosed.

The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1965.

The Director is authorized to charge Deposit Account Number 50-1965 in the amount of \$

SIGNATURE OF ATTORNEY

Perry J. Hoffman, Reg. No. 37,150
 MICHAEL BEST & FRIEDRICH, LLC
 401 North Michigan Avenue
 Suite 1900
 Chicago, Illinois 60611
 Telephone: (312) 222-0800
 Facsimile: (312) 222-0818

Signature

Date:

Perry J. Hoffman
 12-23-03

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CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is:

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Typed or printed name	Carolyn Hothersall
Signature	<i>Carolyn Hothersall</i>

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Date: 12-23-03